

Introduction and Summary

This report describes clients who were served by the Washington State Department of Social and Health Services (DSHS) from July 1990 through June 1991 (State Fiscal Year 1991 or FY91). For each county, both the number of clients in various DSHS programs and the direct service dollars spent on those clients are reported. In addition, the clients and dollars are reported by age groupings and by ethnicity.

The service costs reported represent the direct benefits provided to clients or the cost of direct services provided to clients. In general, costs of eligibility determination, service delivery, administration and prevention/education are not included.

Please note that the terms *service* and *program* are used interchangeably in this report.

Clients, Programs and Divisions

The Department of Social and Health Services (DSHS) is an umbrella human service agency. It offers various services and grants to individuals and families who are eligible based upon having one or more of the following difficulties:

- Poverty
- Recent refugee status
- Long-lasting physical or mental disability, severe enough to affect the basic activities of daily life and/or create employment difficulties
- Severe chemical dependency and/or substance abuse
- Family stress which include abuse or neglect of children and/or dependent adults
- Juvenile criminal adjudication

While DSHS is a single agency, it has multiple organizational units. Programs define a single service or several closely related services (e.g., outpatient treatment) to one set of clients (e.g., children). Seventy-five different programs are analyzed in this report.

DSHS programs are administered through a second level of organization called "divisions". A division administers multiple interrelated programs which are aimed at clients grouped according to specific problems, characteristics or needs. For example, the Division of Alcohol and Substance Abuse administers a number of programs (ADATSA Assessments, ADATSA Outpatient Living Stipend, Detoxification, Methadone Treatment, Outpatient Treatment, Residential Treatment) to persons who are chemically dependent and have low to moderate incomes.

In this report, the Aging and Adult Services Administration (AASA) is treated as a division, even though it is (and was during FY91) organizationally defined as an "administration". This treatment reflects the fact that AASA's internal divisions support clients who are physically disabled, aging or frail with a set of interrelated community services (such as Chore Services and Personal Care) and with residential alternatives (such as nursing homes, adult family homes and congregate care facilities), all coordinated through AASA Field Services. Similarly, the Medical Assistance Administration (MAA) is also treated as a division in this report.

Needs Assessment Database (NADB) Client Database

This report is based upon the Needs Assessment Database (NADB) Client Database for State Fiscal Year 1991. The NADB databases are constructed and maintained by the DSHS Office of Research and Data Analysis (ORDA) on an annual basis. The NADB Client Database was constructed by combining extracts from existing DSHS automated administrative systems into a single client-centered database. No hand-processing of data or identities was undertaken. Therefore, the overall precision and comprehensiveness of the information is dependent upon the data recorded in the administrative systems.

The NADB Client Database was based on a relational design. It contained demographic, geographic and service usage data for each client who used one or more of the programs covered during FY91. Information from 15 DSHS data sources was integrated to create this database. When multiple sources recorded the same service, only one source was used to provide input into the NADB Client Database for that service.

The ten divisions covered, the types of client each division served, and the programs which are included in the NADB Client Database are described in the **DSHS Program Glossary** in this report. The NADB Client Database included 75 different programs, excluding programs which are not described on client automated databases available within the agency. For a listing of missing programs see **Services Not Included in the NADB Client Database** below. Appendices A through E contain important technical information about the NADB Client Database.

The programs contained in the NADB Client Database accounted for about 90% of the estimated DSHS clients statewide. The dollars spent serving those clients directly (excluding administration and service delivery costs as well as service costs for clients who were not in the NADB Client Database) accounted for about 80% of DSHS expenditures. In addition, the NADB Client Database also accounts for the value of federally funded foodstamps and food cash.

Questions this Report Can Answer Directly

Within each of 75 different DSHS programs and the ten divisions, the tables in this report answer the following questions directly, for FY91.

- How many unduplicated clients from each county used each division and each program: overall, and by race/ethnicity and age group?
- How many total dollars were spent directly serving clients from each county: overall, and by race/ethnicity and age group?
- What percentage of the total county population received service (see **Use Rate** below): for each service, each division and DSHS overall?
- What was each county's relative use rate within the state (see **Rank** below): for each service, each division and DSHS overall?

The sum of all the clients in each division's programs will not equal the total clients in that division, since a single client may be served in several programs (hence the unduplicated divisional totals). However, it is possible to add clients across counties, to get multi-county regional totals within a single program or division.

Questions this Report Can Answer Indirectly

The data presented in this report can be converted into several measures which can be used to answer additional questions. For example,

- In a given county, how much money was spent on the average client in each client group?

$$\text{Group A Per Client Cost} = \text{Group A Dollars in County} / \text{Group A Clients in County}$$

Thus for Adams County:

$$\begin{aligned} \text{DIA Regular AFDC Cost} &= \text{DIA Regular AFDC Cost} / \text{DIA Regular AFDC Clients} \\ \$1,188.09 &= \$998,000 / 840 \text{ Clients} \end{aligned}$$

- In a given county, what percentage of the total clients were in each client group?

$$\text{Group A Client Percent} = 100 * \text{Group A Clients in County} / \text{Total Clients in County}$$

Thus for Adams County:

$$\begin{aligned} \text{DIA Regular AFDC Client \%} &= 100 * \text{DIA Regular AFDC Clients} / \text{Adams County Total Clients} \\ 23.76\% &= 100 * 840 / 3,535 \end{aligned}$$

- In a given county, what percentage of the total dollars spent were spent on each client group?

$$\text{Group A Service \$'s Percent} = 100 * \text{Group A Dollars in County} / \text{Total Dollars in County}$$

Thus for Adams County:

$$\begin{aligned} \text{DIA Regular AFDC Svc \$'s \%} &= 100 * \text{DIA Regular AFDC Svc \$} / \text{Adams County Total Svc \$} \\ 10.67\% &= 100 * \$998,000 / \$7,953,000 \end{aligned}$$

Service Use among Groups of Clients

The NADB racial/ethnic codes for clients were built from information already included in the DSHS data sources; therefore, the accuracy of the ethnic/racial data used in this report can be no better than the DSHS information for that client. For details on the creation of a single racial/ethnic identifier for each client, see **Resolving Conflicts in Race/Ethnicity and Gender during Unduplication** in Appendix A.

The following racial/ethnic groups were used here and in all other NADB reports:

- Persons who were not Hispanic and were Asian, American Indian, Black or White
- Persons who were Hispanic regardless of any other ethnic category

Client age was calculated from the client's birth date and was the client's age as of January 1, 1991.

Confidentiality

Due to the sensitivity of some of the service information contained in the NADB Client Database, only staff performing unduplication and operational functions have access to data with personal identification information. The database was constructed to provide information on the patterns of service use and client characteristics for groups of clients, and not to report data at the client level.

To further protect client confidentiality, this report adopts the convention used by the United States Census Bureau of rounding client counts to the nearest five for all cells. For example, if there had been less than three clients receiving a specific service in a specific county, then this report would reflect zero clients in that cell. Had there been three or more such clients, and less than eight, then this report would display five clients.

Use Rate

The use rate is the percentage of the county's total population which was served by a program, division or by DSHS. County use rates are reported for each program, division and for the agency as a whole. The source of the county populations was the 'Washington State 1991 Data Book' published by the Washington State Office of Financial Management, Forecasting Division.

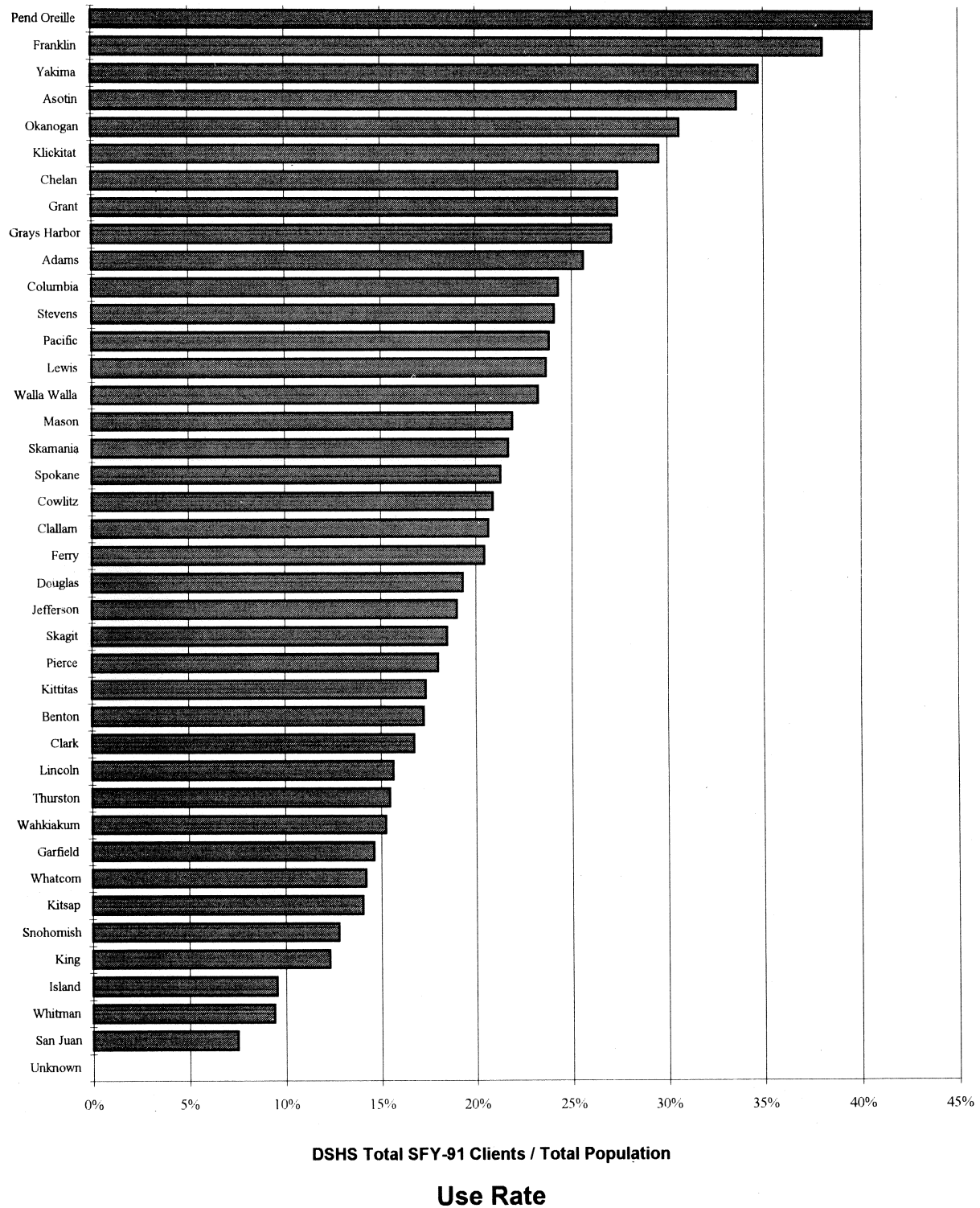
Figure #1 is a graph of the DSHS agency use rates by county. The counties appear on the graph in descending use rate order (also referred to as Rank order, see below). The numbers used to generate this graph are found in each county table of this report in the last row of the 'Use Rate' column.

It should be noted that a high or low use rate may not necessarily indicate an 'over served' or 'under served' population. This is because many DSHS services are targeted to specific groups (e.g., disabled, low income, aged, etc.) who may be over or under represented in a county's general population. The use rates should only be used as a measure of the proportion of people in a county who are served by a particular program, DSHS division or by the agency.

Rank

Each county table has a 'Rank' column. In it, the program, county and agency use rate is ranked relative to the other counties. The highest use rate was given the value of one and the lowest was given the value of thirty nine. Counties with the same use rate were all given the lowest rank value in the range. For example if three counties had the same use rate and they would have been ranked fourth, fifth, and sixth, they were all given the rank of fourth.

Figure 1
County Use Rates in Rank Order



Source: Washington State 1991 Data Book, Office of Financial Management
DSHS ORDA - NADB Client Database FY 1991

Programs and Divisions Included in the NADB Client Database

The following programs are included in this report, individually and as part of the division totals. The **DSHS Program Glossary** at the end of this report briefly describes the services each program provides, and details the smaller programs which were included in the division totals but not reported separately. In addition, the glossary notes the changes from the FY90 NADP reports in program groupings. For example the data reported as "Chore Services" has been expanded to include additional contracted in-home services.

Aging and Adult Services Administration (AASA): Adult Family Homes, Adult Protective Services, Case Management and Assessments, Chore Services, Congregate Care Facilities (CCF), Nursing Homes, Personal Care Services.

Division of Alcohol and Substance Abuse (DASA): ADATSA Assessments, ADATSA Living Stipend, Detoxification, Methadone Treatment, Outpatient Treatment, Residential Treatment.

Division of Children and Family Services (DCFS): Adoption and Adoption Support, Child Protective Services, Employment and Training Child Care, Family Reconciliation Services, First Steps Social Services, Foster Care, Home Based Services, Interim Care Services, Group Care, Therapy Child Care.

Division of Developmental Disabilities (DDD): Assessment and Case Management, Community Residential Facilities, Employment and Training Programs, Family Support, Professional Support Services, Residential Habilitation Center, Supplemental Community Support.

Division of Income Assistance (DIA): AFDC-Employable and FIP-Equivalent, AFDC-Regular and FIP-Equivalent, Aged-Blind-Disabled, Food Assistance, General Assistance Unemployable and Expedited Medicaid Disability (GA-X), Income Assistance Child Care, Job Opportunities and Basic Skills Training Program, Pregnancy Grants, Refugee Grant.

Division of Juvenile Rehabilitation (DJR): Community Placement, Parole, State Institutions and Youth Camps, Mental Health and Chemical Dependency Treatment.

Medical Assistance Administration (MAA): Dental Services, Early and Periodic Screening Diagnosis and Treatment (EPSDT), Emergency Room-Outpatient and Physician Care, Health Maintenance Organization (HMO) Fees, Hospital Inpatient Care, Hospital Outpatient Care, Medical Eligibility - No Service Received, Medicare Part B, Other Medical Services, Physician and Clinic Services, Psychiatrists and Psychologists Services, Prescription Drugs.

Division of Refugee Assistance (DORA): CSO Intake and Case Management, Self Sufficiency Assessment, Planning and Employment Services, English as a Second Language (ESL), Unaccompanied Minors - Foster Care.

Division of Vocational Rehabilitation (DVR): Assess Job Skills, Case Management for Supported Employment, Medical and Psychological Treatment, Personal Support Services, Placement Support Services (Work Support), Regular Case Management, Training, Education and Supplies.

Mental Health Division (MHD): Adult Residential Treatment Facilities, Case Management, Child Study and Treatment Center (CSTC), Day Treatment, Intake and Evaluation in Community Mental Health Centers(CMHC), Involuntary Commitments to Community Hospitals (ITA), Medication Management, Outpatient Treatment, State Institutions.

Services Not Included in the NADB Client Database

The following services were not recorded in the NADB Client Database and were therefore counted in neither the client counts nor the total dollars for each division. Clients using these programs would only be counted if they also used a DSHS service listed on the previous page.

- DIA Consolidated Emergency Assistance Program (CEAP)
- DIA Funeral Internment Assistance
- DIA Telephone Assistance (Lifeline)
- Translators and American Sign Language Interpreters
- Area Agencies on Aging (AAA) Services
- DDD Early Childhood program
- DJR Consolidated Juvenile Services
- MHD Private Long-term Inpatient Facilities for Children
- MHD Community Evaluation and Treatment Facilities
- Office of Support Enforcement Assistance Avoidance
- Office of Support Enforcement Public Assistance Recovery
- AASA Respite Services
- DORA Health Screening
- Most DASA Child Care
- Information and Referral Services for the general public
- Public Education and Prevention

Services Included with Incomplete Dollars in the NADB Client Database

Some services had incomplete cost information available (see also appendix B). These services are included in the Client Database but the service dollars were incompletely reported:

- Dollars lost due to incomplete reporting on automated databases
- An estimated 5% of all DIA grant payments due to one-time payments, corrections and delayed entry in the automated data systems

Services Included with No Dollars in the NADB Client Database

The following services had no automated client level cost information available and are reported in the Client Database with dollar costs of zero (see also appendix B):

- DDD Case management
- First Steps Social Services

Significant Improvements as Compared with FY90 Reports

There were a number of significant improvements in the processing of the FY91 NADB Client Database, including the following:

- Non-grant receiving clients were eliminated from the Aged, Blind or Disabled program. The FY90 Client Database included such clients regardless of grant receiving status.
- An improved dollar allocation method was used for HMO and Medicare Part B premium payments in the FY91 Client Database.

- An improved source for Medicaid client demographic data was used in the creation of the FY91 NADB Client Database. This improved information provided significantly more complete client identification data for clients over the age of 55 than were available during the creation of the FY90 NADP Client Database. Improved client identification data resulted in improved unduplication and lower client counts in the over 55 age groups at the agency level. This effect was most noticeable in the over 64 age groups.

Caution

It has been determined that the FY90 client counts and dollars for DIA Food Assistance, DASA Detoxification and DASA Outpatient services are unreliable and should not be used.

Many year-to-year program changes are reported in the glossary at the end of this report. Please consult the glossary before comparing programs across years.